Effec	ON FEE DETERN tive October 1, 20	001			082	44	0	
CLAIMS A	S FILED - PART (Column 1)	(Column 2)	. •	SMALL EI		OR	OTHER T	
OTAL CLAIMS	\			RATE	FEE	F	RATE	FEE
OR	NUMBER FILED	NUMBER EX	CTRA	BASIC FEI	370.00	OR	ASIC FEE	740.00
OTAL CHARGEABLE CLAIMS	minus 20=	. 0		X\$ 9=		OR	X\$18=	
DEPENDENT CLAIMS	\ minus 3 =	. 0		X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT				+140=		OR	+280=	
of the difference in column 1 is	s less than zero, enti	er "O" in colum	m 2	TOTAL		OR	TOTAL	5740.
CHAMS AS	AMENDED - PAI	RT H		SMALL	ENTITY	OR	OTHER SMALL E	
(Column 1) CLAIMS REMAINING AFTER	HIC NU PREV	HEST MBER PR	ESENT EXTRA	PATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
REMARING AFTER AMENDMENT Total Independent	Minus **	<b>20-</b>		· X\$ 9=		OR	X\$18=	
Independent •	Minus ***	3 =		X42=		OR	X84=	
FIRST PRESENTATION OF	MULTIPLE DEPENDE	NT-ECAIM		+140=		OR	+280=	
_				TOTA		OR	YOTAL ADDIT, FEE	
5-11-05 (Column 1	, (Co	lumn 2) (Co	olumn 3)	AUDII. FE		-		
CLAIMS	N N	CHEST JMBER PI	RESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
REMAINING AFTER AMENDMEN  Total * //	Minus ••	20 -		X\$ 9=		OR	X\$18=	
Independent •	Minus ask	3 -		X42=		OR	X84=	
FIRST PRESENTATION OF	MULTIPLE DEPENDE	ENT CLAIM	لسلبل	+140=		OR	+280=	
	•			101		OR	ADDIT, FE	
		olumn 2) (C	colu <u>mn 3)</u>	ADDIT. FI	:s	_		
(Column CLAIMS REMAININ AFTER	IG PR	HIGHEST HUMBER F EVIOUSLY	RESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONA FEE
AFTER AMENDME Total * Independent *	Minus **	AID FOR		X\$ 9:			X\$18=	
Total *	Manus ***		•	X42		OF	V04-	1
FIRST PRESENTATION C	F MULTIPLE DEPEND	ENT CLAIM		+140		<b>1</b>		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  " If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."					ral ral	- OF	101/	<u> </u>
	1961 610 and 1 and 1		20 center "20"	ADDIT. F			ADDIT. F	£